

Electronic Data Interchange (EDI)

South Dakota Medicaid can receive and send claims data from and to our authorized partners electronically, referred to as Electronic Data Interchange (EDI). EDI is a computer to computer transfer of data. For providers, this computer may be your own computer, or you may elect to hire an entity such as a clearinghouse to create and send/receive these transactions for you.

Trading Partners

The entity that actually sends the data directly to SD Medicaid from their computer or who directly receives the data from SD Medicaid is known as a "Trading Partner." All Trading Partners must be known to SD Medicaid. When a Trading Partner is approved, a Trading Partner ID will be issued. This ID will be on every EDI transaction as it identifies the entity sending or receiving data. Login instructions for the [State's data exchange application](#) will also be shared.

Self-Submitters

Providers who can send/receive data from their own computers without assistance from other trading partners are called self-submitters. Self-submitters are enrolled as billing providers using a billing NPI. Any software necessary to transact EDI has been acquired by the self-submitter as SD Medicaid does not provide or recommend particular software. Self-submitters will note their ability to self-submit under the "Claim Submission Method" portion of their enrollment record. Self-submitters are able to share a Trading Partner ID for multiple BNPI within their own organization but may not share or submit claims for providers outside of their organization.

Clearinghouses

For non-providers who are directly sending/receiving electronic data on behalf of an enrolled billing NPI, the entity must be enrolled as a Clearinghouse. This creates an approved data partner relationship with SD Medicaid for the purpose of exchanging data. Upon approval, a Trading Partner ID will be issued. This ID will need to be shared with clients to be populated in the "Claim Submission Method" portion of the billing NPI's enrollment record. This ID and the subsequent capture of authorized transactions will impact what data is shared with the clearinghouse.

Billing Agents

Providers may choose to hire another party such as an accounting firm to build or create the claims that get submitted to SD Medicaid. These billing agents preparing the claims provide a useful service, but may not be the entity which enacts the computer to computer EDI. In these situations, the billing agent is not a trading partner and would not be enrolled with SD Medicaid. If the claims prepared by the billing agent are being sent by EDI, the provider will need to obtain the clearinghouse's trading partner ID and populate it in the "Claim Submission Method."

Transactions

EDI transactions follow federally defined format and data requirements. These standardized formats are often called "HIPAA" formats or "X12" formats and are used by payors throughout the health care sector. The 837s represent electronic claims being sent to SD Medicaid or its designee requesting

payment. The 835 represents the outcome of the processed claim. Some of the most common transactions include:

837I = institutional claim; similar to UB-04 paper forms; commonly used with providers billing for room and board;

837P = professional claim; similar to CMS-1500

837D = dental claim

835 = electronic remittance advice; includes a string of data representing payment information designed to be used to automatically update patient accounts and is not intended to be viewed like a report; refer to the online Medicaid Provider Portal for a readable format

277 = claim status response

Additional details on standardized formats can be found in our [HIPAA Manuals & Companion Guides](#).